

Case Example: Miller/Hamlin Family*

Carolina Hamlin	age 25
Richard Hamlin	deceased
Jonathan Miller	age 32
Mariana Miller	infant
José Hamlin	age 4
Susana Hamlin	age 5

Rosa Hernandez **age 22**
(sister of Carolina)

Reason for Referral:

On November 1, 1998, Robert Freid, pediatrician from Greenwood Hospital, reported the expected birth of a high-risk child. Carolina Hamlin was pregnant, due to deliver December 7, 1998. The doctor reported that she had been diagnosed with depression and had a history of drug abuse. The doctor also reported that Ms. Hamlin had told him that the Division of Child and Family Services (DCFS) had previously removed her other two children in 1995, due to neglect and drug involvement. The children were returned to Ms. Hamlin about a year later after she had successfully begun recovery through the help of Narcotics Anonymous. Dr. Freid and the health nurse had seen Carolina Hamlin over the past several months, trying to assure that she receive adequate prenatal care. Carolina was progressively less responsive to these contacts and sometimes appeared unconcerned about the care of her expected child, or the preparation for the birth.

On November 5, 1998, DCFS received a call from the hospital that Ms. Hamlin had prematurely delivered a female child named Mariana. The mother's behavior was described by the hospital as being psychotic during and after delivery, and that the mother was unable to care for herself, let alone her child. Ms. Hamlin's sister, Rosa Hernandez, was caring for the two older children but it was clear that she had neither the space nor the resources to care for a newborn with health problems. Rosa speaks limited English and had just moved to the community from Southern Texas. The hospital and doctor were requesting probable need of protective custody for this child, since Ms. Hamlin would probably require further hospitalization.

The hospital kept Mariana in care until November 22 when DCFS received word that the child was ready for discharge. Ms. Hamlin had been moved to the psychiatric ward. Mariana was placed in protective custody and a petition was filed.

* Because of confidentiality, this is a fictitious case example. It is adapted with permission from material developed by Donna Schuurman for the *Oregon Citizen Review Board Manual* (January 1995).

On November 22, 1998, a petition was filed in Juvenile Court alleging that Mariana's conditions and circumstances were an endangerment to her own welfare in that, Carolina, her mother, was incapable of providing for Mariana and her special medical needs. Carolina was incapable of providing care because of her hospitalization, continued depression and possible psychosis. A shelter hearing took place on this same date. Ann Bryant was selected as the Court Appointed Special Advocate (CASA) for Mariana. Attorney Jim Palmer was appointed to represent the parents. The court found probable cause for Mariana to remain in DCFS custody with a recommendation for shelter care placement. Mariana was subsequently placed with a medical foster parent.

Family Information:

Carolina Hamlin is a young Mexican-American woman who is fiercely trying to manage her life, which often seems unmanageable. She speaks English well, but prefers Spanish, especially since her sister, Rosa, speaks limited English. Carolina's mother, after suffering from diabetes most of her life, is deceased. Carolina's father's whereabouts are unknown. The last the family heard, he was an active alcoholic. Ms. Hamlin is close to her sister who has been supportive during Carolina's battle with drugs. Carolina and Rosa have one brother who lives in Texas, but his whereabouts are unknown. Ms. Hamlin used alcohol in her early teen years, with increasingly progressive use. After her marriage in 1990 she stopped drinking. She began using drugs after the death of her husband in 1994. Richard Hamlin died as a result of injuries sustained in an automobile accident. His blood alcohol level was .14 at the time of his death. Her friends and companions at that time supplied her with drugs, and encouraged her to forget her problems. She has maintained intermittent employment at minimum wage, requiring public assistance when she was without employment.

The two older children were placed in care May 1995 at the ages of 2 and 10 months, after Carolina had left them alone for approximately five hours. A neighbor reported the situation. The children were removed and placed in emergency foster care for four days. They moved to regular foster care when Carolina and the staff agreed that she would require treatment for drug abuse. Carolina's sister, Rosa, was too young to provide a home for the children, and no other relatives were available. DCFS staff helped get Carolina into treatment for her drug abuse. The children were returned to Carolina in March of 1997.

The children moved in with their Aunt Rosa in September 1997, when their mother became increasingly depressed.

Jonathan Miller is the father of Mariana, according to both he and Carolina. Little is known about Jonathan's background, other than he and Carolina had been living together for the past several months, until she became depressed in September. José and Susana say they like Jonathan. Rosa says she has only known him a few months, but that he appeared to enjoy Carolina and the children, before Carolina became depressed. He moved out then and has since been living with friends, moving around every week or so. Jonathan met Carolina at Narcotics Anonymous. He works full time in a local discount department store as a manager of stock.

Mariana Miller was born 11/5/98. Her expected due date was December 7, 1998. Mariana's mother was brought to Greenwood Hospital by her sister, Rosa, when it was obvious she was in labor. Mariana was born the same day. She weighed 5 pounds, 1 ounce. Mariana was kept in the hospital until November 22, 1998 because of her low birth weight and respiratory problem. Hospital staff also wanted to check for possible drug related complications. Mariana was experiencing periods of apnea and was on a heart monitor. The lab test on Mariana verified she was not drug affected. Mariana left the hospital on November 22. She was placed in a medical foster home where she was continued on a heart monitor. Although it is felt she will not have to be on the heart monitor much longer, her condition needs to be monitored closely. Even though Mariana has special medical needs, she is a very appealing child. Mariana is fed on a frequent schedule and is gaining weight faster than was first expected. The medical foster parent, Helen Hart, and the pediatrician have a good rapport which is helpful in monitoring Mariana.

José Hamlin is a typical 4-year-old in most ways. He speaks Spanish at home some, and always with his aunt. He also speaks English. However, he is more active than many boys his age. His mother worries that her drug use after the death of José's father harmed José. José sometimes asks his mother and his aunt where his Areal daddy is. José goes to a day care center every day. The director of the day care center has talked with Rosa and Carolina about asking a physician about drugs to help José with his short attention span and high activity level. Both Rosa and Carolina are opposed to the idea.

Susana Hamlin looks and acts a little older than her 5 years. She is very protective of José and tends to Amother him. Susana is in a full-day kindergarten program, where she is an excellent pupil. She speaks both Spanish and English.

Rosa Hernandez is Carolina Hamlin's sister. Rosa is 22 years old and is very close to her sister. They went through emotional battles as children, with a father who drank too much and a mother who had many health problems. Rosa considers Carolina her only family, since their older brother has lost contact with them. She and Carolina's NA Sponsor were essential supports to Carolina as she began recovery. Rosa has just begun a community college course in English as a second language. She loves Susana and José, but finds it challenging to keep them in her one-bedroom apartment.

Questions:

- 1) What strengths can you identify in this family?
- 2) What questions do you have about this family's situation, especially around legal issues?
- 3) What do you see as the problems that brought these children into care?
- 4) What do you want to see as an outcome for this family?